



Commissioner for Patents  
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Bib Data Sheet

CONFIRMATION NO. 8791

|   |   |                                    |   |  |                                |
|---|---|------------------------------------|---|--|--------------------------------|
| <b>SERIAL NUMBER</b><br>09/37,875   | <b>FILING DATE</b><br>10/01/2002<br><b>RULE</b>   | <b>CLASS</b><br>607                | <b>GROUP ART UNIT</b><br>3762   | <b>ATTORNEY DOCKET NO.</b><br>P01,0337 |                                |
| <b>APPLICANTS</b><br>Mart Min, Tallinn, ESTONIA;<br>Andres Kink, Harjumma, ESTONIA;<br>Toomas Parve, Tallinn, ESTONIA;  |   |                                    |   |  |                                |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/SE00/00572 03/23/2000 <i>CHL 5/31/05</i>  |   |                                    |   |  |                                |
| <b>** FOREIGN APPLICATIONS *****</b><br>SWEDEN 9901194-2 03/31/1999 <i>CHL 5/31/05</i>  |   |                                    |   |  |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br>Verified and <i>Allowance</i><br>Acknowledged: <i>CHL</i><br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>ESTONIA | <b>SHEETS DRAWING</b><br>1  | <b>TOTAL CLAIMS</b><br>6               | <b>INDEPENDENT CLAIMS</b><br>1 |
| <b>ADDRESS</b><br>26574   |   |                                    |   |  |                                |
| <b>TITLE</b><br>Rate adaptive pacemaker <i>AND</i> <del>USING</del> <b>IMPEDANCE MEASUREMENTS, STROKE VOLUME CALCULATIONS</b>   |   |                                    |   |  |                                |
| <b>FILING FEE RECEIVED</b><br>1450  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                    | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                |

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